

OPEN ENROLLMENT

Dependent Verification: New dependents/spouse added to a plan for 2011 and those dependents/spouses who were not verified during the 2010 Dependent Eligibility Audit must submit the appropriate documents by **December 20, 2010**. **Each document must have the member's name and social security number noted on the top of the document. All documents must be mailed; faxed copies are not legible and will not be accepted.** Applications should be entered by the IC and the verification/certification documentation sent to EIB separately, we do not need the application to process the verification documents.

All Dependent children age 19 to 26: Members must submit the affidavit: "2011 Certification of Dependent Eligibility" for each dependent child age 19-26. **The affidavit must be completed and signed and mailed to DEI to arrive by December 20, 2010.**

KEHP will run a report on December 21st and dependents for which documentation has not been submitted will be removed from the 2011 Plan. Members must file a grievance (normal grievance process) and submit the appropriate documents through the grievance process to have dependents added to the plan for 2011.

Here are some examples of the documents needed for Open Enrollment and for the remainder of the 2011 Plan Year.

Example: New or previously unverified spouse only has to submit dependent verification documents.

Example: New or previously unverified dependents, ages 0 through 18 years, only have to submit dependent verification documents.

Example: New or previously unverified dependent child, between the ages 19 to 26 years, must submit dependent verification documents plus "2011 Certification of Dependent Eligibility" form.

Example: Dependent child turns 19 during the 2011 plan year. Must submit "2011 Certification of Dependent Eligibility" form on or before the 20th day of the month following their 19th birthday.

Example: Dependent age 19 to 26, verified during 2010 eligibility audit, only needs to submit the "2011 Certification of Dependent Eligibility".

IC Should:

Dependent Verification and Affidavit:

- IC must enter the application on line. (Except for X Ref)
- **EVERY VERIFICATION DOCUMENT MUST HAVE THE MEMBER'S NAME AND SOCIAL SECURITY NUMBER PRINTED AT THE TOP OF THE DOCUMENT**

- Mail verification documents to DEI (**We cannot accept documents that are faxed; documents are not legible when faxed and will not scan legibly.**) Do not need to send a copy of the application if it should be entered on line, we do not need the application to process the verification documents.
- DOCUMENTS MUST REACH DEI BY THE DUE DATES

Qualifying Events:

- The qualifying event application must be signed within the QE time frame.
- Qualifying event documentation should be submitted with the application.
- Verification of dependent/spouse must be included with application.
- Effective date of QE will remain under the same rules as currently in effect and if necessary coverage will be activated retroactively. Coverage will not be activated until dependent verification is received.
- EVERY VERIFICATION DOCUMENT MUST HAVE THE MEMBER'S NAME AND SOCIAL SECURITY NUMBER PRINTED AT THE TOP OF THE DOCUMENT.
- Mail QE documents and verification documents to DEI (**We cannot accept documents that are faxed; documents are not legible when faxed and will not scan legibly.**)
- DOCUMENTS MUST REACH DEI BY THE DUE DATES

REMAINDER OF 2011

New Hires: Verification must be received within 30 days of the hire date.

Retirees: Verification must be received 15 days before coverage begins for new dependents or for dependent which have not been verified. (Still working on this process)

Qualifying Events: Verification must be submitted with the QE documents. QE document must still be signed within the qualifying event time frame.

DEI Process: On the 25th of each month data analysis will run a report on all dependents who have not been verified and whose effective date of insurance will be the first of the next month.

DEI will terminate coverage for dependents that are not verified. Members must file a grievance (normal grievance process) and submit the appropriate documents through the grievance process to request dependent coverage be activated.